



For questions regarding our Direct Pay Prices, please contact your provider's office.

Pulmonary Medicine

The Direct Pay Price for our most common services are listed below. For a description of 'Direct Pay Price', please visit www.bannerhealth.com/DirectPayPriceDescription.

HCPCS/ CPT Code ⁽¹⁾	Description	Direct Pay <u>Facility</u> Price (2)	Direct Pay Non-Facility Price (3)
99201	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, PROBLEM FOCUSED/STRAIGHTFORWARD	57.00	90.00
99202	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, FROBELINT OCCISED/STRAIGHTTORWARD NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, EXPANDED PROBLEM	107.00	155.00
J3202	FOCUSED/STRAIGHTFORWARD	107.00	155.00
99203	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, DETAILED/LOW COMPLEXITY	163.00	225.00
99204	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/MODERATE	275.00	345.00
JJ20 4	COMPLEXITY	273.00	3-3.00
99205	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/HIGH COMPLEXITY	353.00	429.00
99211	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, THAT MAY NOT REQUIRE	20.00	43.00
JJ211	PRESENCE OF PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL	20.00	.5.00
99212	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, PROBLEM	55.00	90.00
	FOCUSED/STRAIGHTFORWARD		
99213	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, EXPANDED PROBLEM	108.00	150.00
	FOCUSED/LOW COMPLEXITY		
99214	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, DETAILED/MODERATE	165.00	223.00
	COMPLEXITY		
99215	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/HIGH	233.00	300.00
	COMPLEXITY		
99217	HOSPITAL OBSERVATION CARE, DISCHARGE	151.00	151.00
99218	INITIAL HOSPITAL OBSERVATION CARE,	141.00	141.00
	DETAILED/COMPREHENSIVE/STRAIGHTFORWARD/LOW COMPLEXITY		
99219	INITIAL HOSPITAL OBSERVATION CARE, COMPREHENSIVE/MODERATE COMPLEXITY	234.00	234.00
99220	INITIAL HOSPITAL OBSERVATION CARE, COMPREHENSIVE/HIGH COMPLEXITY	327.00	327.00
99221	INITIAL HOSPITAL INPATIENT CARE, DETAILED/COMPREHENSIVE/STRAIGHTFORWARD/LOW	211.00	211.00
	COMPLEXITY		
99222	INITIAL HOSPITAL INPATIENT CARE, COMPREHENSIVE/MODERATE COMPLEXITY	287.00	287.00
99223	INITIAL HOSPITAL INPATIENT CARE, COMPREHENSIVE/HIGH COMPLEXITY	422.00	422.00
99224	SUBSEQUENT OBSERVATION CARE, PROBLEM FOCUSED/STRAIGHTFORWARD/LOW	61.00	61.00
	COMPLEXITY		
99225	SUBSEQUENT OBSERVATION CARE, EXPANDED PROBLEM FOCUSED/MODERATE COMPLEXITY	107.00	107.00
99226	SUBSEQUENT OBSERVATION CARE, DETAILED/HIGH COMPLEXITY	161.00	161.00
99231	SUBSEQUENT HOSPITAL INPATIENT CARE, PROBLEM FOCUSED/STRAIGHTFORWARD/LOW COMPLEXITY	84.00	84.00
99232	SUBSEQUENT HOSPITAL INPATIENT CARE, EXPANDED PROBLEM FOCUSED/MODERATE COMPLEXITY	152.00	152.00
99233	SUBSEQUENT HOSPITAL INPATIENT CARE, DETAILED/HIGH COMPLEXITY	217.00	217.00
99238	HOSPITAL DISCHARGE DAY MANAGEMENT, 30 MINUTES OR LESS	151.00	151.00
99239	HOSPITAL DISCHARGE DAY MANAGEMENT, MORE THAN 30 MINUTES	221.00	221.00
99241	PATIENT OFFICE CONSULTATION, PROBLEM FOCUSED/STRAIGHTFORWARD	71.00	102.00
99242	PATIENT OFFICE CONSULTATION, EXPANDED PROBLEM FOCUSED/STRAIGHTFORWARD	147.00	191.00
99243	PATIENT OFFICE CONSULTATION, DETAILED/LOW COMPLEXITY	205.00	260.00
99244	PATIENT OFFICE CONSULTATION, COMPREHENSIVE/MODERATE COMPLEXITY	324.00	384.00
99245	PATIENT OFFICE CONSULTATION, COMPREHENSIVE/HIGH COMPLEXITY	402.00	470.00
99251	INPATIENT HOSPITAL CONSULTATION, PROBLEM FOCUSED/STRAIGHTFORWARD	103.00	103.00
99252	INPATIENT HOSPITAL CONSULTATION, EXPANDED PROBLEM FOCUSED/STRAIGHTFORWARD	158.00	158.00
99253	INPATIENT HOSPITAL CONSULTATION, DETAILED/LOW COMPLEXITY	241.00	241.00
99254	INPATIENT HOSPITAL CONSULTATION, COMPREHENSIVE/MODERATE COMPLEXITY	347.00	347.00
99255	INPATIENT HOSPITAL CONSULTATION, COMPREHENSIVE/HIGH COMPLEXITY	419.00	419.00
99291	CRITICAL CARE DELIVERY, FIRST 30-74 MINUTES	472.00	575.00
99292	CRITICAL CARE DELIVERY, EACH ADDITIONAL 30 MINUTES	237.00	259.00
31500	EMERGENT INSERTION OF BREATHING TUBE INTO WINDPIPE CARTILAGE USING AN ENDOSCOPE	239.00	239.00
31620	ULTRASOUND OF LUNG AIRWAYS DURING DIAGNOSTIC EXAMINATION USING AN ENDOSCOPE	149.00	606.00
31622	PLACEMENT OF RADIATION THERAPY MARKERS IN LUNG AIRWAYS USING AN ENDOSCOPE	321.00	683.00
31623	EXAMINATION OF LUNG AIRWAYS USING AN ENDOSCOPE	321.00	734.00
31624	IRRIGATION AND SUCTION OF LUNG AIRWAYS TO OBTAIN CELLS USING AN ENDOSCOPE	322.00	685.00
31625	BIOPSY OF LUNG AIRWAYS USING AN ENDOSCOPE	373.00	736.00





For questions regarding our Direct Pay Prices, please contact your provider's office.

Pulmonary Medicine

The Direct Pay Price for our most common services are listed below. For a description of 'Direct Pay Price', please visit www.bannerhealth.com/DirectPayPriceDescription.

HCPCS/ CPT Code (1)	Description	Direct Pay <u>Facility</u> Price (2)	Direct Pay Non-Facility Price (3)
31628	BIOPSY OF ONE LOBE OF LUNG USING AN ENDOSCOPE	413.00	862.00
31629	NEEDLE BIOPSY OF WINDPIPE CARTILAGE, AIRWAY, AND/OR LUNG USING AN ENDOSCOPE	446.00	1,340.00
31633	NEEDLE BIOPSY OF LUNG USING AN ENDOSCOPE	138.00	191.00
36556	INSERTION OF CATHETER IN VEIN FOR INFUSION	267.00	513.00
36620	INSERTION OF ARTERIAL CATHETER FOR BLOOD SAMPLING OR INFUSION	111.00	111.00
76937	ULTRASOUND GUIDANCE FOR ACCESSING INTO BLOOD VESSEL	77.00	77.00
94010	MEASUREMENT AND GRAPHIC RECORDING OF TOTAL AND TIMED EXHALED AIR CAPACITY	77.00	77.00
94060	MEASUREMENT AND GRAPHIC RECORDING OF THE AMOUNT AND SPEED OF BREATHED AIR, BEFORE AND FOLLOWING MEDICATION ADMINISTRATION	133.00	133.00
9406026	MEASUREMENT AND GRAPHIC RECORDING OF THE AMOUNT AND SPEED OF BREATHED AIR, BEFORE AND FOLLOWING MEDICATION ADMINISTRATION (PROFESSIONAL COMPONENT ONLY)	32.00	32.00
94726	DETERMINATION OF LUNG VOLUMES USING PLETHYSMOGRAPHY	117.00	117.00
9472626	DETERMINATION OF LUNG VOLUMES USING PLETHYSMOGRAPHY (PROFESSIONAL COMPONENT ONLY)	18.00	18.00
94729	MEASUREMENT OF LUNG DIFFUSING CAPACITY	116.00	116.00
9472926	MEASUREMENT OF LUNG DIFFUSING CAPACITY (PROFESSIONAL COMPONENT ONLY)	12.00	12.00
J3301	INJECTION, TRIAMCINOLONE ACETONIDE, NOT OTHERWISE SPECIFIED, 10 MG	3.20	3.20

⁽¹⁾ HCPCS (Healthcare Common Procedure Coding System), also referred to as CPT (Current Procedural Terminology), is a uniform coding system for describing medical, surgical and diagnostic services as well as supplies, pharmaceuticals, etc.

⁽²⁾ The Direct Pay <u>Facility</u> Price is applicable when services are provided in a facility setting; for example, a hospital, a skilled nursing facility or an ambulatory surgical center.

⁽³⁾ The Direct Pay Non-Facility Price is applicable when services are provided in a non-facility setting; for example, a physician's office or a patient's home.